PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

10/517588

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
U.S	. NATIONAL :	STAGE FEES		•	<u> </u>		RATE	Т	FEE	1	RATE	FEE	
BAS	IC FEE		SMALL ENT.	ENT. = \$ 150		LARGE ENT. = \$ 300		十	-	OR	BASIC FEE	300	
EXA	MINATION FE	E	Satisfies PCT Article 33(1)- (4) = \$50/\$100			her situations = 100 / \$ 200	EXAM. FEE			1 .	EXAM. FEE	200	
SEA	RCH FEE		U.S. Is ISA = \$50 / \$100 ALL other countries = \$200 / \$400			her situations = 250 / \$ 500	SEARCH F	EE			SEARCH FEE	500	
FEE	FOR EXTRA S	SPEC. PGS.	2 0 minus 100 =			/ 50 =	X \$ 125	=		Ì	X \$ 250 =		
τοτ	AL CHARGEAI	BLE CLAIMS	2 minus 20 = .		•		X \$ 25	=		OR	X·\$ 50 =		
INDI	PENDENT CL	AIMS	minus 3 = ,		•		X \$ 100	=		OR	X \$ 200 =		
MUL	TIPLE DEPEN	DENT CLAIM PRI	ESENT				+ \$ 180	=		OR	+ \$ 360 =	-	
* If the difference in column 1 is less than zero, enter "0" in column 2										OR	TOTAL	1000	
	CLAIMS AS AMENDED - PART II 2 0 (Cotumn 1) (Cotumn 2) (Cotumn 3)							SMALL ENTITY		OR	OTHER THAN SMALL ENTITY		
AMENDMENT A	• /	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATE	Т	ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 20	Minus	· 2	0	=	X \$ 25	-		OR	X \$ 50 =		
	Independent	. 2	Minus	Z		=	X \$ 100	= .		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+ \$ 180	=		OR	+ \$ 360 =		
TOTAL ADDIT. FEE OR TOT											TOTAL ADDIT. FEE	1000	
		(Column 1)		(Cotur	nn 21	(Column 3)							
AMENDMENT 8		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	EST BER DUSLY	PRESENT EXTRA	RATE	П	ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	*		=	X \$ 25	•		OR	X \$ 50 =		
	Independent	•	Minus	***		=	X \$ 100	=		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+ \$ 180	=		OR	+ \$ 360 =		
			-			,	TOTAL ADD	л.		OR	TOTAL ADDIT. FEE		
* If the entry in column 1 is less than the entry in column 2, write "O" in column 3. ** If the "Highest Number Previously Pa's For" IN THIS SPACE is less than "20", enter "20". *** If the "Highest Number Previously Pa'd For" IN THIS SPACE is less than "3", enter "3".													
	The "Highest Nun	nber Previously Paid	For (Total or Inde	pendent) b	the high	est number found i	n the appropriate	box in o	otumn 1.				